CC Foi	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	462199	
:015>	Study Area Name	PLAINS COOP TEL ASSN	
<020>	Program Year	2019	
<030>	Contact Name: Person USAC should contact with questions about this data	Brian Jarvis	
035>	Contact Telephone Number: Number of the person identified in data line <030>	7192664334 ext.	
:039>	Contact Email Address: Email of the person identified in data line <030>	bjarvis@tcatel.com	
	Form Type	54.313 and 54.422	

								ON	C Form 481 AB Control No. 3060 y 2018	-0986/OMB Control I	to. 3060-0819
Study Area Co	de				462199						
Study Area Na	me				PLAINS COOP	TEL ASSN					
Program Year					2019						
Contact Name	- Person USAC	should contac	t regarding this	data							
Contact Telepi	hone Number -	Number of pe	rson identified	in data line <0	30> <sup>7192664334</sup>	ext.					
Contact Email	Address - Ema	il Address of pe	erson identified	in data line <0	30> bjarvis@tca	tel.com					
For the prior	calendar yea	r, were there	any reportal	ole voice serv	ice outages?						
<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d>&gt;</d>	<e></e>	<₽	<g></g>	<h></h>
NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage	Preventati Procedure
							, , , , ,	,,,,,	(100)	110001011	11000001
									_		
					100						
									-		
	4							1			
	Study Area Na Program Year Contact Name Contact Telep Contact Email For the prior <a> NORS Reference</a>	Contact Name - Person USAC Contact Telephone Number Contact Email Address - Ema For the prior calendar yea <a> <b1> NORS Reference Outage Start</b1></a>	Study Area Name Program Year Contact Name - Person USAC should contact Contact Telephone Number - Number of pe Contact Email Address - Email Address of po For the prior calendar year, were there <a> <b> <b> <b> <b> <b> <b> <b> <b> <b> <b< td=""><td>Study Area Name  Program Year  Contact Name - Person USAC should contact regarding this  Contact Telephone Number - Number of person identified  Contact Email Address - Email Address of person identified  For the prior calendar year, were there any reportal  <a> <b1> <b2> <b3> <b3>  NORS  Reference  Outage Start  Outage Start  Outage Start  Outage End</b3></b3></b2></b1></a></td><td>Study Area Name  Program Year  Contact Name - Person USAC should contact regarding this data  Contact Telephone Number - Number of person identified in data line &lt;0.  Contact Email Address - Email Address of person identified in data line &lt;0.  For the prior calendar year, were there any reportable voice services <a> <b1> <b2> <b3> <b4> <b4> <b7 end="" end<="" nors="" outage="" reference="" start="" td=""><td>Study Area Name PLAINS COOP Program Year 2019  Contact Name - Person USAC should contact regarding this data Brian Jarvis Contact Telephone Number - Number of person identified in data line &lt;0300 7192664334  Contact Email Address - Email Address of person identified in data line &lt;0300 bjarvisetca For the prior calendar year, were there any reportable voice service outages?  <a> <b> <b> <b> <b> <b> <b> <b> <b> <b> <b< td=""><td>Study Area Name PLAINS COOP TEL ASSN  Program Year  Contact Name - Person USAC should contact regarding this data  Brian Jarvia  Contact Telephone Number - Number of person identified in data line &lt;030&gt;  Contact Email Address - Email Address of person identified in data line &lt;030&gt;  bjarviasetcate1.com  For the prior calendar year, were there any reportable voice service outages?  <a> <b> </b> <c1> <c2> NORS  Reference  Outage Start  Outage Start  Outage End  Outage End  Number of</c2></c1></a></td><td>Study Area Name PLAINS COOP TEL ASSN  Program Year 2019  Contact Name - Person USAC should contact regarding this data Brian Jarvia  Contact Telephone Number - Number of person identified in data line &lt;030&gt; bjarvisætcate1.com  Contact Email Address - Email Address of person identified in data line &lt;030&gt; bjarvisætcate1.com  For the prior calendar year, were there any reportable voice service outages?  <a> <b1> <b2> <b3> <b4> <b2> <b3> <b4> &lt;<c1> <c2> <d>&lt;<c2> <d><d><d><d><d></d>  Number of Customers Affected Total Number of Affected Time Customers Affected Total Number of Affected Affected Total Number of Number Numb</d></d></d></d></c2></d></c2></c1></b4></b3></b2></b4></b3></b2></b1></a></td><td>Study Area Name</td><td>Study Area Name</td><td>Study Area Name   FLAINS   COOP TEL ASSN  Program Year   2019  Contact Name - Person USAC should contact regarding this data   Brian   Jarvis    Contact Telephone Number - Number of person identified in data line &lt;0300   Plant   P</td></b<></b></b></b></b></b></b></b></b></b></a></td></b7></b4></b4></b3></b2></b1></a></td></b<></b></b></b></b></b></b></b></b></b></a>	Study Area Name  Program Year  Contact Name - Person USAC should contact regarding this  Contact Telephone Number - Number of person identified  Contact Email Address - Email Address of person identified  For the prior calendar year, were there any reportal <a> <b1> <b2> <b3> <b3>  NORS  Reference  Outage Start  Outage Start  Outage Start  Outage End</b3></b3></b2></b1></a>	Study Area Name  Program Year  Contact Name - Person USAC should contact regarding this data  Contact Telephone Number - Number of person identified in data line <0.  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(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	462199		
<015>	Study Area Name	PLAINS COOP TEL ASSN		
<020>	Program Year	2019		
<030>	Contact Name - Person USAC	should contact regarding this data	ian Jarvis	
<035>	Contact Telephone Number - <030>	Number of person identified in data line	7192664334 ext.	
<039>	Contact Email Address - Email <030>	Address of person identified in data line	bjarvis@tcatel.com	
<400>	voice complaints (zero or grea	to indicate how you would like to repor ter) for voice telephony service in the pr area in which you are designated an ETC e, lease, or otherwise utilize.	ior	
<410>	Complaints per 1000 custome	rs for fixed voice		
<420>	Complaints per 1000 custome	rs for mobile voice		

(500) Compliance With Service Quality Standards and Consumer Protection Rules Data Collection Form		要转进的复数形式等等的现在分词的 医多种性性性性性性性性性性性性性性性性性性性性性性性性性性性性性性性性性性性性	
<010>	Study Area Code	462199	
<015>	Study Area Name	PLAINS COOP TEL ASSN	
<020>	Program Year	2019	
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com	

(600) Functionality in Emergency Situations	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	462199
<015>	Study Area Name	PLAINS COOP TEL ASSN
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis2tcatel.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	462199C0610.pdf

20100000	erating Companies ection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-081 July 2018
<010>	Study Area Code	462199		
<015>	Study Area Name	PLAINS COOP TEI	ASSN	
<020>	Program Year	2019		
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis		
<035>	Contact Telephone Number - Number of person identified in data line <030	> 7192664334 ext		
<039>	Contact Email Address - Email Address of person identified in data line <030	> bjarvis@tcatel	.com	
<810>	Reporting Carrier Plains Cooperative Telephone Association,	Inc.		,
<811>	Holding Company Name Not Available			
<812>	Operating Company Plains Cooperative Telephone Association,	Inc.		
<813>	<b>41&gt;</b>		<a2></a2>	<83>
	Affiliates		SAC	Doing Business As Company or Brand Designation
				, ,
		Soo attack		
		- See attach	ed workshee	
		- See attach	ed workshee	
		- See attach	ed workshee	
		- See attach	ed workshee	
		- See attach	ed workshee	
	-	- See attach	ed workshee	
	_	- See attach	ed workshee	
	-	- See attach	ed workshee	

CONTRACTOR OF THE	ibal Lands Reporting llection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	462199	
<015>	Study Area Name	PLAINS COOP TEL ASSN	
<020>	Program Year	2019	9
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com	
<900>	Does the filing entity offer tribal land services? (Y/N)	No	
<910>	Tribal Land(s) on which ETC Serves		
<920>	Tribal Government Engagement Obligation	Name of At	tached Document
If your o	company serves Tribal lands, please select (Yes,No, NA) for each these boxes		
	rm the status described on the attached PDF, on line 920,		
	strates coordination with the Tribal government pursuant to	Select	
	B(a)(5) includes:	Yes or No or	
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	Not Applicable	
<922>	Feasibility and sustainability planning;	*******	
<923>	Marketing services in a culturally sensitive manner;		
<924>	Compliance with Rights of way processes	79	
<925>	Compliance with Land Use permitting requirements		
<926>	Compliance with Facilities Siting rules		
<927>	Compliance with Facilities Siting rules  Compliance with Environmental Review processes		
<928>	Compliance with Cultural Preservation review processes		
	•		
<929>	Compliance with Tribal Business and Licensing requirements.		

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			74	rage
SSE2004-0900	olce and Broadband Service Rate Comparability lection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-081 July 2018
<010>	Study Area Code		462199	
<015>	Study Area Name		PLAINS COOP TEL ASSN	
<020>	Program Year		2019	
<030>	Contact Name - Person USAC should contact regarding this data		Brian Jarvis	
<035>	Contact Telephone Number - Number of person identified in data line	:030>	7192664334 ext.	
<039>	Contact Email Address - Email Address of person identified in data line	<030>	bjarvis@tcatel.com	
<1000>	Voice services rate comparability certification	Yes		
<1010>	Attach detailed description for voice services rate comparability compliance			
			Name of Attached Document	
<1020>	Broadband comparability certification	Yes the	- Pricing is no more than the m Wireline Competition Bureau	ost recent applicable benchmark announced by
<1030>	Attach detailed description for broadband			
	comparability compliance			
			Name of Attached Document	

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Lifeline				FCC Form 481
Data Coll	ection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code		462199	
<015>	Study Area Name		PLAINS COOP TEL ASSN	
<020>	Program Year		2019	
<030>	Contact Name - Person USAC should contact regarding this data		Brian Jarvis	
<035>	Contact Telephone Number - Number of person identified in data	ine <030	> 7192664334 ext.	
<039>	Contact Email Address - Email Address of person identified in data	line <030	> bjarvis@tcatel.com	
			462199C01210.pdf	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans			
				Name of Attached Document
<1220>	Link to Public Website	НТТР		
or the wel	ueck these boxes below to confirm that the attached document(s), on line bsite listed, on line 1220, contains the required information pursuant to a)(2) annual reporting for ETCs receiving low-income support, carriers mu eport:			
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	<b>/</b>		
<1222>	Details on the number of minutes provided as part of the plan,	<b>/</b>		
<1223>	Additional charges for toll calls, and rates for each such plan.	<b></b>		

A DESCRIPTION OF THE PARTY OF T	ce Cap Carrier Additional Documentation		FCC Form 481.	0.0017
	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		OMB Control No. 3060-0986/OMB Control No. 3060 July 2018	J-0815
merganig i	ide-Of-Return curriers uffindred with Price cup Local Exchange curriers			
<010>	Study Area Code	462199		
<015>	Study Area Name	PLAINS COOP TEL ASSN		
	Program Year	2019		
	Contact Name - Person USAC should contact regarding this data	Brian Jarvis 7192664334 ext.		
	Contact Telephone Number - Number of person identified in data line <030>			
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com		
to offse form a		Phase II support as so	npliance as a recipient of frozen High Cost support, High Cost supported on the forth in 47 CFR 54.313(c),(d),(e). The information reported on the	
Price C	ap Carrier Connect America ICC Support {47 CFR §	54.313(d)}		
<201	6> Certification support used to build broadband			
Conne	ct America Phase II Reporting {47 CFR § 54.313(e)}			
<2017A	> Connect America Fund Phase II recipient?			
<2017C	Total amount of Phase II support, if any, the price cap capital expenditures in 2017.	carrier used for		
<2018>	Attach the number, names, and addresses of commu	nity anchor	Name of Attached Document Listing	
	institutions to which the carrier newly began providin broadband service in the preceding calendar year - 5	•	Required Information	
<2019>	Recipient certifies that it bid on category one telecom	munications and		
	Internet access services in response to all FCC Form 4 broadband service that meets the connectivity targer libraries universal service support program for eligibl libraries located within any area in a census block whereceiving Phase II model-based support, and that sucreasonably comparable to rates charged to eligible sc	170 postings seeking ts for the schools and e schools and iere the carrier is h bids were at rates		

(3005) Rate Of Return Carrier Additional Documentation Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	462199
<015>	Study Area Name	PLAINS COOP TEL ASSN
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com

# CAF BLS Reporting

(3008A)	Please indicate whether new locations were deployed during the prior calendar year.	(Yes/No)	Yes
(3008B)	Please enter the number of new locations deployed in the prior calendar year associated with each of the following speed tiers.		
(3008B1)	Number of newly built locations with access to broadband speeds of at least 10/1 Mbps but less than 25/3 Mbps.		6
(3008B2)	Number of newly built locations with access to broadband speeds of 25/3 Mbps or higher.		1
(3008C)	Please provide the percentage of deployment across the entire study area.		

(3005) Rate ( Data Collecti	Of Return Carrier Additional Documentation tion Form				FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code				
<015>	Study Area Name		162199	GOOD EE	
<020>	Program Year			COOP TE	LASSN
			2019		
<030>	Contact Name - Person USAC should contact regarding this data		Brian J	arvis	
<035>	Contact Telephone Number - Number of person identified in data	line <030>	71926643	34 ext.	
				@tastal	
<039>	Contact Email Address - Email Address of person identified in data	line <030>	bjarvis@tcatel.com		
elect from	Contact Email Address - Email Address of person identified in data methods to the drop down menu or check the boxes below to note reporting requirements set forth in 47 CFR 54.313(f)(2). It below is accurate.	e compliance v	vith 54.313(f	f)(1). Privately	r held carriers must ensure compliance with the
elect from inancial re ttached b	m the drop down menu or check the boxes below to note reporting requirements set forth in 47 CFR 54.313(f)(2). I below is accurate.  Progress Report on 5 Year Plan	e compliance v	vith 54.313(f	f)(1). Privately	r held carriers must ensure compliance with the
elect from	m the drop down menu or check the boxes below to note reporting requirements set forth in 47 CFR 54.313(f)(2). I below is accurate.	e compliance v	vith 54.313(i that the inf	f)(1). Privately ormation rep	r held carriers must ensure compliance with the orted on this form and in the documents
elect from inancial re ttached b	m the drop down menu or check the boxes below to note reporting requirements set forth in 47 CFR 54.313(f)(2). It below is accurate.  Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)  Certification of Public Interest Obligations (47 CFR §	e compliance v	vith 54.313(i that the inf	f)(1). Privately	r held carriers must ensure compliance with the orted on this form and in the documents
elect from inancial re ttached b	m the drop down menu or check the boxes below to note reporting requirements set forth in 47 CFR 54.313(f)(2). It below is accurate.  Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)  Certification of Public Interest Obligations (47 CFR § 54.313(f)(1)(i)) Please Provide Attachment	e compliance v further certify	vith 54.313(i that the inf Yes - At	f)(1). Privately ormation rep tach Certific	r held carriers must ensure compliance with the orted on this form and in the documents
elect from inancial re ttached b 3009)	m the drop down menu or check the boxes below to note reporting requirements set forth in 47 CFR 54.313(f)(2). It below is accurate.  Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)  Certification of Public Interest Obligations (47 CFR § 54.313(f)(1)(i)) Please Provide Attachment  Nar  Info Community Anchor Institutions (47 CFR § No -	e compliance v	vith 54.313(I that the inf Yes - At Document Lis	F)(1). Privately ormation rep tach Certific	r held carriers must ensure compliance with the orted on this form and in the documents
elect from inancial re ttached b 3009) 3010A)	m the drop down menu or check the boxes below to note reporting requirements set forth in 47 CFR 54.313(f)(2). I below is accurate.  Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)  Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)} Please Provide Attachment  Nar  Community Anchor Institutions {47 CFR § No - 54.313(f)(1)(ii)} Please Provide Attachment  Nar	e compliance v further certify me of Attached	vith 54.313(that the inf Yes - At Document Lis	f)(1). Privately ormation rep tach Certific sting Required	r held carriers must ensure compliance with the orted on this form and in the documents
elect from nancial re ttached b 3009) 3010A) 3010B)	m the drop down menu or check the boxes below to note reporting requirements set forth in 47 CFR 54.313(f)(2). I below is accurate.  Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)  Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)} Please Provide Attachment  Nar  Community Anchor Institutions {47 CFR § No - 54.313(f)(1)(ii)} Please Provide Attachment  Nar  Info	me of Attached ormation No New Commu	vith 54.313(that the inf Yes - At Document Lis	f)(1). Privately ormation rep tach Certific sting Required	r held carriers must ensure compliance with the orted on this form and in the documents

Name of Attached Document Listing Required

Name of Attached Document Listing Required

Information

00

Information

(Yes/No)

462199C03017.pdf

(3015)

(3016)

(3017)

(3018)

(3019)

(3020)

(3021)

(3022)

(3023)

(3024)

(3025)

(3026)

Borrowers)

documentation

audited?

certification.

and Statement of Cash Flows

Electronic copy of their annual RUS reports (Operating Report for Telecommunications

and Statement of Cash Flows

and Statement of Cash Flows

Document(s) with Balance Sheet, Income Statement

If the response is yes on line 3014, attach your

company's RUS annual report and all required

If the response is no on line 3014, is your company

If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:

Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers

Document(s) for Balance Sheet, Income Statement

Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:

Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers

Underlying information subjected to a review by an independent certified public accountant

Document(s) with Balance Sheet, Income Statement

Attach the worksheet listing required information

Underlying information subjected to an officer

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Deta Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	462199
<015>	Study Area Name	PLAINS COOP TEL ASSN
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com

Financial Data Summary (3027) Revenue	3572733
(3028) Operating Expenses	3606070
(3029) Net Income	-219192
(3030) Telephone Plant In Service(TPIS)	20517230
(3031) Total Assets	17077788
(3032) Total Debt	8263618
(3033) Total Equity	7306785
(3034) Dividends	0

(4005) Rural Broadband Experiment Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

Study Area Code	462199
Study Area Name	PLAINS COOP TEL ASSN
Program Year	2019
Contact Name - Person USAC should contact regarding this data	Brian Jarvis
Contact Telephone Number - Number of person identified in data li	ne <030> 7192664334 ext.
Contact Email Address - Email Address of person identified in data li	ine <030> bjarvis@tcatel.com
	Study Area Name Program Year  Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data li

#### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations and provide a list of newly served community anchor institutions.

#### Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas.

#### Community Anchor Institutions – FCC 14-98 (paragraph 79)

**4003a**. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

#### If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

(5005) Alaska Plan Participants Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	462199
<015>	Study Area Name	PLAINS COOP TEL ASSN
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com

#### 5005 Alaska Plan

(5010)	Do you participate in the Alaska plan?	(Yes/No)
(5011)	Please indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previous calendar year in areas previously served exclusively by performance-limiting satellite backhaul.	(Yes/No)
(5012)	If the filing carrier identified in its approved perfomance plans that it relies exclusively on satellite backhaul for a certain poriton of the population in its service area, indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previoius calendar year in areas that were previoiusly served exclusively by satellite backhaul.	(Yes/No)

<5013> 🧾	<a></a>	<b></b>	<b>&lt;</b> C>
	Description Of Backhaul Technology	Date Backhaul Available	Newly Served Locations or Population
_			
_			
_			
_			
_			
_			
_			
			1
_			
_			
0			1917
_			

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018

<010>	Study Area Code	462199
<015>	Study Area Name	PLAINS COOP TEL ASSN
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

# Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Signature of Authorized Officer: Date Printed name of Authorized Officer: Title or position of Authorized Officer: Title or position of Authorized Officer: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification - Agent / Carrier Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018	
<010>	Study Area Code	462199		
<015>	Study Area Name	PLAINS COOP TEL ASSN		
<020>	Program Year	2019		
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis		
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.		
<039>	Contact Fmail Address - Fmail Address of person identified in data line <030>	bjarvis@tcatel.com		

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier  certify that (Name of Agent) TCA, Inc					
also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.					
Name of Authorized Agent: TCA, Inc.					
Name of Reporting Carrier: PLAINS COOP TEL ASSN					
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 07/12/2018				
Printed name of Authorized Officer: Ronny Puckett					
Title or position of Authorized Officer: General Manager					
Telephone number of Authorized Officer: 9703584211 ext.					
Study Area Code of Reporting Carrier: 462199	Filing Due Date for this form: 07/16/2018				
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

#### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier				
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.				
Name of Reporting Carrier: PLAINS COOP TEL ASSN				
Name of Authorized Agent Firm: TCA, Inc.				
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date: 07/12/2018			
Name of Authorized Agent Employee: Brian Jarvis				
Title or position of Authorized Agent or Employee of Agent Senior Financial Consultant				
Telephone number of Authorized Agent or Employee of Agent: 7192664334 ext.				
Study Area Code of Reporting Carrier: 462199 Filing Due Date for this form:	07/16/2018			
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.				



(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	462199
<015>	Study Area Name	PLAINS COOP TEL ASSN
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com
<810>	Reporting Carrier Plains Cooperative Telephone Association,	Inc.

<810>	Reporting Carrier	Plains Cooperative Telephone Association, Inc.
<811>	Holding Company	Name Not Available
<812>	Operating Company	Plains Cooperative Telephone Association, Inc.

<a></a>	<a2></a2>	<b>@3&gt;</b>
Affiliates	SAC	<b>Doing Business As Company or Brand Designation</b>
Plains Communication Services, LLC.		
	<del></del>	
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7000		
×		

#### CONFIDENTIAL AND PROPRIETARY

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid

searching existing data sources, gathering and maint			ormation collection is estimated to average 4 hours per response, incl the collection of information.	aming the time for reviewing in		
USDA-RUS			This data will be used by RUS to review your financial situation. Your response is required by 7 U.S.C. 901 et seq.			
OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS			and, subject to federal laws and regulations regarding confidential information, will be treated as confidential.			
			BORROWER NAME			
			Plains Cooperative Telephone Association, Inc.			
			(Prepared with Audited Data)			
INSTRUCTIONS-Submit report to RUS within	30 days after close of the p	eriod.	PERIOD ENDING	BORROWER DESIGNATION	ON	
For detailed instructions, see RUS Bulletin 174	14-2. Report in whole dolla	rs only.	December, 2017	CO0518		
			ERTIFICATION			
to the best of our knowledge and be ALL INSURANCE REQUIRED RENEWALS HAVE BEEN OBT DURING THE P.	elief. BY 7 CFR PART 1788 AINED FOR ALL PO ERIOD COVERED BY an documents	, CHAPTER XVI LICIES. ( THIS REPORT	I, RUS, WAS IN FORCE DURING THE REPORT!  PURSUANT TO PART 1788 OF 7CFR CHAPTER of the following)  There has been a default in the fulfillment of the obligation.	NG PERIOD AND XVII gations		
have been fulfilled in all material respe	cts.		under the RUS loan documents. Said default(s) is/a specifically described in the Telecom Operating Rep			
		DATE	-			
		<u> </u>	A. BALANCE SHEET			
	BALANCE	BALANCE		BALANCE	BALANCE	
ASSETS	PRIOR YEAR	END OF PERIOD	LIABILITIES AND STOCKHOLDERS' EQUITY	PRIOR YEAR	END OF PERIOD	
CURRENT ASSETS			CURRENT LIABILITIES			
Cash and Equivalents	1,762,854	948,014	25. Accounts Payable	566,313	308,438	
2. Cash-RUS Construction Fund	7,024	6,991	26. Notes Payable			
3. Affiliates:			27. Advance Billings and Payments			
a. Telecom, Accounts Receivable			28. Customer Deposits	3,995	4,93	
b. Other Accounts Receivable	0	295,157	29. Current Mat. L/T Debt	535,778	553,618	
c. Notes Receivable			30. Current Mat. L/T Debt-Rur. Dev.	333,	555,616	
4. Non-Affiliates:			31. Current MatCapital Leases			
a. Telecom, Accounts Receivable	9,596	5,236	32. Income Taxes Accrued	0		
Other Accounts Receivable	971,538				172 06	
	142,297		33. Other Taxes Accrued	174,634	172,963	
c. Notes Receivable	142,237			252,072	138,685	
5. Interest and Dividends Receivable			35. Total Current Liabilities (25 thru 34)	1,532,792	1,178,639	
6. Material-Regulated	207,612	146,033	LONG-TERM DEBT	0.010.746		
7. Material-Nonregulated	60.416	100 600	36. Funded Debt-RUS Notes	8,819,746	8,263,618	
8. Prepayments	62,416	100,602	37. Funded Debt-RTB Notes			
9. Other Current Assets			38. Funded Debt-FFB Notes			
10. Total Current Assets (1 Thru 9)	3,163,337	1,932,883	39. Funded Debt-Other			
NONCURRENT ASSETS			40. Funded Debt-Rural Develop. Loan			
11. Investment in Affiliated Companies			41. Premium (Discount) on L/T Debt			
a. Rural Development	0		42. Reacquired Debt			
b. Nonrural Development	1,664,988	1,911,701	43. Obligations Under Capital Lease			
2. Other investments			44. Adv. From Affiliated Companies			
a. Rural Development			45. Other Long-Term Debt			
b. Nonrural Development	512,543	1,041,070	46. Total Long-Term Debt (36 thru 45)	8,819,746	8,263,618	
3. Nonregulated Investments			OTHER LIAB. & DEF. CREDITS			
4. Other Noncurrent Assets	50,061	62,433	47. Other Long-Term Liabilities	56,822	325,575	
5. Deferred Charges			48. Other Deferred Credits	2,061	3,171	
6. Jurisdictional Differences			49. Other Jurisdictional Differences			
7. Total Noncurrent Assets (11 thru 16)	2,227,592	3,015,204	50. Total Other Liabilities and Deferred Credits (47 thru 49)	58,883	328,746	
PLANT, PROPERTY, AND EQUIPMENT		ogia sone-acidistica godino digistro acidida	EQUITY		in the state of th	
8. Telecom, Plant-in-Service	20,375,134	20,517.230	51. Cap. Stock Outstand. & Subscribed			
9. Property Held for Future Use			52. Additional Paid-in-Capital			
20. Plant Under Construction	27,420	0	53. Treasury Stock			
21. Plant Adj., Nonop. Plant & Goodwill	21,420		54. Membership and Cap. Certificates	7 000		
	7 641 553	0 307 500		7,203	7,203	
22. Less Accumulated Depreciation	7,641,553		55. Other Capital	200,897	216,900	
Net Plant (18 thru 21 less 22)	12,701,001		56. Patronage Capital Credits	4,879,664	7,301,874	
)TAL ASSETS (10+17+23)			57. Retained Earnings or Margins	2,652,745	(219,192)	
			58. Total Equity (51 thru 57)	7 740 509	7 306 785	

18,151,930 17,077,788

18,151,930 17,077,788

59. TOTAL LIABILITIES AND EQUITY (35+46+50+58)

**USDA-RUS** 

# OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS

BORROWER DESIGNATION

CO0518

PERIOD ENDING

December, 2017

NSTRUCTIONS- See RUS Bulletin 1744-2

#### PART B. STATEMENTS OF INCOME AND RETAINED EARNINGS OR MARGINS

ITEM	PRIOR YEAR	THIS YEAR
Local Network Services Revenues	321,209	317,34
2. Network Access Services Revenues	3,649,293	3,162,250
Long Distance Network Services Revenues	1,565	1,098
4. Carrier Billing and Collection Revenues	10,537	3,669
5. Miscellaneous Revenues	84,372	87,42
6. Uncollectible Revenues	(1,431)	(946)
7. Net Operating Revenues (1 thru 5 less 6)	4,068,407	3,572,73
8. Plant Specific Operations Expense	916,704	1,062,47
9. Plant Nonspecific Operations Expense (Excluding Depreciation & Amortization)	217,415	278,694
10. Depreciation Expense	937,929	947,48
11. Amortization Expense	6,189	8,064
12. Customer Operations Expense	248,432	243,530
13. Corporate Operations Expense	880,605	1,065,822
14. Total Operating Expenses (8 thru 13)	3,207,274	3,606,070
15. Operating Income or Margins (7 less 14)	861,133	(33,337)
16. Other Operating Income and Expenses	001,133	(33/337)
17. State and Local Taxes		588
18. Federal Income Taxes	(1,050)	6,576
19. Other Taxes		166,971
. Total Operating Taxes (17+18+19)	172,743	174,135
1. Net Operating Income or Margins (15+16-20)	689,440	(207,472)
22. Interest on Funded Debt	312,307	276,758
	312,307	276,756
23. Interest Expense - Capital Leases	836	
24. Other Interest Expense		7 120
25. Allowance for Funds Used During Construction	0	7,126
26. Total Fixed Charges (22+23+24-25)	313,143	
27. Nonoperating Net Income	1,985,962	11,199
28. Extraordinary Items		
29. Jurisdictional Differences		
30. Nonregulated Net Income	294,408	246,713
1. Total Net Income or Margins (21+27+28+29+30-26)	2,656,667	(219,192)
32. Total Taxes Based on Income	(10,500)	58,089
33. Retained Earnings or Margins Beginning-of-Year	912,508	2,652,745
34. Miscellaneous Credits Year-to-Date		
35. Dividends Declared (Common)		
6. Dividends Declared (Preferred)		
37. Other Debits Year-to-Date		
88. Transfers to Patronage Capital	916,430	2,652,745
9. Retained Earnings or Margins End-of-Period [(31+33+34) - (35+36+37+38)]	2,652,745	(219,192)
0. Patronage Capital Beginning-of-Year	4,231,841	4,879,664
1. Transfers to Patronage Capital	916,430	2,652,745
2. Patronage Capital Credits Retired	268,607	230,535
3. Patronage Capital End-of-Year (40+41-42)	4,879,664	7,301,874
4. Annual Debt Service Payments	838,318	814,921
5. Cash Ratio [(14+20-10-11) / 7]	0.5985	0.7906
6. Operating Accrual Ratio [(14+20+26) / 7]	0.9075	1.1335
7. TIER [(31+26) / 26]	9.4839	0.1871
8. DSCR [(31+26+10+11) / 44]	4.6688	

USDA-RUS

BORROWER DESIGNATION

CO0518

# OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS

PERIOD ENDED

INST	December  RUCTIONS – See help in the online application.	, 2017
	PART I – STATEMENT OF CASH FLOWS	
1.	Beginning Cash (Cash and Equivalents plus RUS Construction Fund)	1 760 07
	CASH FLOWS FROM OPERATING ACTIVITIES	1,769,87
2.	Net Income	(219,192
	Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities	(219,192
3.	Add: Depreciation	947,48
4.	Add: Amortization	8,06
5.	Other (Explain)	0,700
	Changes in Operating Assets and Liabilities	
6.	Decrease/(Increase) in Accounts Receivable	373,82
7.	Decrease/(Increase) in Materials and Inventory	61,579
8.	Decrease/(Increase) in Prepayments and Deferred Charges	(38,186)
9.	Decrease/(Increase) in Other Current Assets	C
10.	Increase/(Decrease) in Accounts Payable	(257,875)
11.	Increase/(Decrease) in Advance Billings & Payments	
12.	Increase/(Decrease) in Other Current Liabilities	(115,058)
13.	Net Cash Provided/(Used) by Operations	760,641
	CASH FLOWS FROM FINANCING ACTIVITIES	
14.	Decrease/(Increase) in Notes Receivable	18,361
15.	Increase/(Decrease) in Notes Payable	0
16.	Increase/(Decrease) in Customer Deposits	940
<u>)                                    </u>	Net Increase/(Decrease) in Long Term Debt (Including Current Maturities)	(538,288)
18.	Increase/(Decrease) in Other Liabilities & Deferred Credits	269,863
19.	Increase/(Decrease) in Capital Stock, Paid-in Capital, Membership and Capital Certificates & Other Capital	16,003
20.	Less: Payment of Dividends	0
21.	Less: Patronage Capital Credits Retired	(230,535)
22.	Other (Explain)	
23.	Net Cash Provided/(Used) by Financing Activities	(463,656)
0.4	CASH FLOWS FROM INVESTING ACTIVITIES	
24.	Net Capital Expenditures (Property, Plant & Equipment)	(114,676)
25.	Other Long-Term Investments	(775,240)
26.	Other Noncurrent Assets & Jurisdictional Differences	(12,372)
27.	Other (Explain) Plant retirements, salvage	(209,570)
28.	Net Cash Provided/(Used) by Investing Activities	(1,111,858)
29.	Net Increase/(Decrease) in Cash	(814,873)
30.	Ending Cash	955,005

**Revision Date 2010** 

## **FCC Form 481 Certifications**

FCC Form 481 Line 610
Plains Cooperative Telephone Association
SAC 462199

# **Line 610: Functionality in Emergency Situations**

- The company maintains a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. {47 CFR §54.202(a)}
- The company has made reasonable provisions to meet emergencies resulting from power failures; sudden and prolonged increases in traffic; staff shortages; and fire, storm, and acts of god. {4 CCR 732-2.2335 The Provision of Service During Maintenance or Emergencies}



# PUBLIC INTEREST OBLIGATIONS CERTIFICATION FORM 481 – LINE 3010B

Pursuant to 47 C.F.R. § 54.313(f)(1)(i) of the Commission's rules, Plains Cooperative Telephone Association, Inc., Study Area Code 462199, herby certifies that it is taking reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas and that requests for such service are met within a reasonable amount of time.

Respectfully submitted,

Ronny Puckett

General Manager

# **FCC Form 481 Certifications**

FCC Form 481 Line 1210
Plains Cooperative Telephone Association
SAC 462199

# **Line 1210: Lifeline Terms and Conditions**

Lifeline subscribers receive unlimited local calling at a discount of \$9.25.

# LIFELINE LOW INCOME ASSISTANCE PROGRAM

You may be eligible for discounts of \$9.25 on your monthly telephone charges.

Lifeline is a government benefit program that provides monthly discounts on ONE telephone service (wireline or wireless) for low-income consumers. Lifeline is a non-transferable benefit and is available to eligible low-income consumers in every state, territory, common wealth and on Tribal lands. You must be eligible to enroll, and you must re-certify your eligibility with the service provider every year. Federal rules prohibit eligible consumers from receiving more than one Lifeline service per household.

Through the assistance program administered by the Federal government called "Lifeline", eligible individuals who are currently receiving benefits via one of the following programs may also be eligible for a discount on their Basic Telephone Service. Toll blocking is available at no charge for low income customers that qualify.

Individuals may qualify for this discount by being a participant in one of the following programs:

- Public Housing Assistance (FPHA) or Section 8
- Supplemental Security Income (SSI)
- Supplemental Nutrition Assistance Program (SNAP)
- Medicaid
- Veteran's Pension and Survivor Benefit

Participation in a Federal program alone, such as Social Security, does not constitute eligibility for these phone charge discounts. The legislature expanded eligibility to include all residents who have a monthly household gross income at or below 135 percent of the federal poverty level. Lifeline is a government assistance program, service is non-transferable.

Only eligible customers may enroll and the program is limited to one discount per household. To determine if you are eligible, please go to <u>Do I Qualify</u>? This will walk you through a few questions and inform you if you qualify for the discount. To apply for the Lifeline discount, please complete the form and return it with the proper documentation to the Plains office and we will then verify your eligibility. <u>Please click here for the Lifeline Application</u> or contact the business office.

If you have questions or need to contact the Plains Cooperative Telephone Association business office, please call (970)358-4211. Visit <a href="www.lifelinesupport.org">www.lifelinesupport.org</a> for more details about getting connected to the program.